

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME JOY ALEXANDER		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL TRUSTEE	
MAILING ADDRESS 2450 Courtenay St.		PHONE NO. 778-554-2450	
CITY / TOWN VANCOUVER	POSTAL CODE V6R 3X3	EMAIL (IF AVAILABLE) joyealexander@hotmail.com	
JURISDICTION SCHOOL DISTRICT 39			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) VISION VANCOUVER			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) VISION VANCOUVER ELECTOR ASSOCIATION			
FINANCIAL AGENT'S LAST NAME KANG	FIRST NAME OPREET	MIDDLE NAME	
FINANCIAL AGENT'S MAILING ADDRESS 4635 STATION MAIN		PHONE NO. 604-568-6913	
CITY / TOWN VANCOUVER	POSTAL CODE V6B 4A1	EMAIL (IF AVAILABLE) FINANCIAL.AGENT@VOTEVISION.	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/06/23	If there were previous financial agents, complete form 4236.		

Tick if candidate was registered as a third party sponsor

Tick if candidate acted as a campaign organizer

This disclosure statement includes the following forms:

Declarations and Campaign Accounts – Form 4221

Summary of Election Expenses – Form 4229

Statement of Income and Expenses – Form 4222

Transfers Given to Elector Organization – Form 4230

Summary of Campaign Contributions by Class – Form 4223

Other Permissible Payments – Form 4231

Significant Contributors (\$100 or more) – Form 4224

Shared Election Expense – Form 4232

Prohibited Campaign Contributions – Form 4225

Transfers Between Candidate's Own Accounts – Form 4233

Transfers Received from Elector Organization – Form 4226

Disbursement of Surplus Funds – Form 4234

Other Permissible Deposits – Form 4227

Free Advertising from Jurisdiction – Form 4235

Fundraising Function Ticket Sales – Form 4228

Previous Financial Agents – Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE

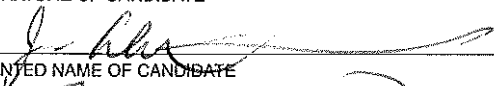



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NAME OF CANDIDATE JOY ALEXANDER

Declaration:

I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the *Local Elections Campaign Financing Act (LECFA)*.

SIGNATURE OF CANDIDATE 	DATE: (YYYY/MM/DD) 2015/02/09
PRINTED NAME OF CANDIDATE JOY ALEXANDER	

SIGNATURE OF FINANCIAL AGENT 	DATE: (YYYY/MM/DD) 2015/02/09
PRINTED NAME OF FINANCIAL AGENT Upreet Kang	

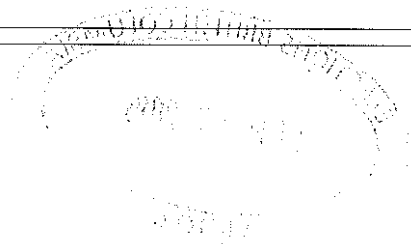
Campaign accounts:

NAME OF SAVINGS INSTITUTION RBC ROYAL BANK
ADDRESS 4501 WEST 10TH AVE., VANCOUVER, BC V6R 2J2

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS



4222 - STATEMENT OF INCOME AND EXPENSES
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
JOY ALEXANDER

Total value of campaign contributions from all sources (from box C on form 4223)	<input type="text" value="3,000.00"/>	
Transfers received from elector organization (from box A on form 4226)	<input type="text"/>	
Total other permissible deposits (from box A on form 4227)	<input type="text"/>	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	<input type="text"/>	
Total Income (sum of above boxes)	<input type="text" value="3,000.00"/>	A
Election expenses (from box A on form 4229)	<input type="text"/>	
Transfers to elector organization (from box A on form 4230)	<input type="text"/>	
Total other permissible payments (from box A on form 4231)	<input type="text"/>	
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	<input type="text"/>	
Amount of surplus funds disbursed (from box A on form 4234)	<input type="text"/>	
Total Expenditures (sum of above boxes)	<input type="text" value="3,000.00"/>	B



4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
JOY ALEXANDER

		All Contributions	
	Individuals	3,000.00	
	Corporations	0.00	
	Unincorporated Business/Commercial Organizations	0.00	
	Trade Unions	0.00	
	Non-profit Organizations	0.00	
	Other Identifiable Contributors	0.00	
	Total	\$ 0.00	A

Anonymous contributions \$ 0.00 **B**

Total contributions (A + B) \$ 3,000.00 **C**

Total significant contributions (must equal box A on all forms 4224) \$ 3,000.00

Total contributions of less than \$100 \$ 0.00

Number of contributors who gave less than \$100 # 0

Number of anonymous contributors # 0



4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE JOY ALEXANDER	PAGE <input style="width: 30px;" type="text" value="1"/>
	OF <input style="width: 30px;" type="text" value="1"/>

DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR <small>(For class 2, 3, 4, 5 & 6, include full names of two directors)</small>	ADDRESS OF CONTRIBUTOR <small>(For class 2, 3, 4, 5 & 6 only)</small>	CLASS*	VALUE OF CONTRIBUTION
2014/04/14	JOY ALEXANDER		1	3,000.00
TOTAL CONTRIBUTIONS				3,000.00

IF NEEDED, ATTACH ADDITIONAL FORMS
 *CLASS OF CONTRIBUTOR:
 1 – INDIVIDUAL, 2 – CORPORATION, 3 – UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION
 4 – TRADE UNION, 5 – NON-PROFIT ORGANIZATION, 6 – OTHER IDENTIFIABLE CONTRIBUTOR

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE JOY ALEXANDER	PAGE <input style="width: 20px;" type="text" value="1"/>
	OF <input style="width: 20px;" type="text" value="1"/>

INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received.
 Attach additional forms if necessary.

RECEIVED FROM	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED					
Complete this field if the prohibited campaign contribution was received from an individual:					
NAME OF INDIVIDUAL					
Complete these fields if the prohibited campaign contribution was received from an organization:					
NAME OF ORGANIZATION					CLASS*
MAILING ADDRESS					
NAME OF DIRECTOR			NAME OF DIRECTOR		

*CLASSES OF CONTRIBUTORS:
 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE JOY ALEXANDER	PAGE 1 OF 1
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DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
TOTAL			A 0.00

*Also include legal name if different than ballot name.

**4227 - OTHER PERMISSIBLE DEPOSITS
TO CAMPAIGN ACCOUNT**

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE JOY ALEXANDER	PAGE <input style="width: 30px;" type="text" value="1"/>
	OF <input style="width: 30px;" type="text" value="1"/>

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
			TOTAL A 0.00

* TYPE:
 I - Interest
 D - Dividends of shares paid by credit union
 S - Surplus funds from previous election returned by jurisdiction
 F - Fundraising income not reported as a campaign contribution
 O - Other (describe)

This form is available for public inspection.
ORIGINAL — ELECTIONS BC
 PLEASE KEEP A COPY FOR YOUR RECORDS

This information is collected to administer the *Local Elections Campaign Financing Act*.
 Questions? Contact: Privacy Officer, Elections BC
 1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD

NAME OF CANDIDATE JOY ALEXANDER		PAGE <input style="width: 20px; text-align: center;" type="text" value="1"/>
		OF <input style="width: 20px; text-align: center;" type="text" value="1"/>
DATE OF EVENT (YYYY/MM/DD) NA	DESCRIPTION OF FUNDRAISING EVENT NA	

Income reported as campaign contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations				<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
Total income reported as campaign contributions				

Remember to report all campaign contributions on form 4223 - Summary of Campaign Contributions by Class, and if applicable, on form 4224 - Significant Contributors (\$100 or more).

Other income not reported as campaign contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by individuals of tickets of \$50 or less				<input type="checkbox"/>

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
JOY ALEXANDER

	Column A Election Expenses	Column B Election Proceedings Period Expenses				
ADVERTISING						
Brochures, pamphlets and flyers	500.00					
Internet	0.00					
Newspaper, magazine, journal						
Radio						
Signs and billboards						
Television						
Other advertising						
CAMPAIGN ADMINISTRATION						
Salaries and wages						
Rent, insurance and utilities						
Courier and postage						
Furniture and equipment						
Office supplies						
Professional services	2,500.00					
Other campaign administration expenses						
Conventions and meetings						
Other campaign related functions						
Research and polling						
Interest						
EXCLUSIONS THAT MUST BE REPORTED						
Personal election expenses						
Interest on loans for election expenses						
Legal and accounting services						
Financial agent services						
Other expenses (describe)						
Total Expenses	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 100px; text-align: right;">3,000.00</td> </tr> </table>	A	3,000.00	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">B</td> <td style="width: 100px; text-align: right;">0.00</td> </tr> </table>	B	0.00
A	3,000.00					
B	0.00					

Column A - Report the value of all election expenses for goods and services used in the campaign period.
The campaign period is from January 1, 2014 to November 15, 2014.

Column B - Report the value of all election expenses for goods and services used in the election proceedings period.
The election proceedings period is from September 30, 2014 to November 15, 2014.

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
JOY ALEXANDER

PAGE **1**
OF **1**

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER

*Also include legal name if different than ballot name.

TOTAL	A	0.00
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This form is available for public inspection.
ORIGINAL — ELECTIONS BC
PLEASE KEEP A COPY FOR YOUR RECORDS

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1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

4231 - OTHER PERMISSIBLE PAYMENTS
FROM CAMPAIGN ACCOUNT
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
JOY ALEXANDER

PAGE
OF

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
TOTAL			A 0.00

* TYPE:
B - Bank fees
E - Intended election expense that was not used
F - Payments made for fundraising purposes
N - Nomination deposit
O - Other (describe)

This form is available for public inspection.
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4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE
 JOY ALEXANDER

PAGE
 OF

DESCRIPTION OF SHARED EXPENSE
 NA

Total value of shared election expense	<input type="text" value="0.00"/>
Candidate's portion of shared election expense*	<input type="text" value="0.00"/>
Amount paid directly to supplier (if applicable)	<input type="text" value="0.00"/>
Amount of reimbursements given to other candidate(s)	<input type="text" value="0.00"/>
Amount of reimbursements received from other candidates	<input type="text" value="0.00"/>

*Note: Remember to include your portion of the shared expense as an election expense on form 4229 - Summary of Election Expenses.

Full names of other candidates with whom the expense was shared:

LAST NAME	FIRST NAME	MIDDLE NAME

**4233 - TRANSFERS BETWEEN CANDIDATE'S
OWN CAMPAIGN ACCOUNTS**
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE JOY ALEXANDER	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
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Transfers between candidate's own campaign accounts in same jurisdiction

PURPOSE	AMOUNT

Transfers from candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		A 0.00

Transfers to candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		B 0.00

The amounts in boxes A and B must be carried forward to form 4222.

4234 - DISBURSEMENT OF SURPLUS FUNDS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
JOY ALEXANDER

Balance remaining in campaign account(s) after payment of all expenses A

Total amount of campaign contributions from candidate B

Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign C

Date of reimbursement to candidate (YYYY/MM/DD)

Amount of remaining surplus funds (after any reimbursement under box C) D

If the amount in Box D is \$500 or more, it must be paid to the jurisdiction in which the candidate ran for election. Provide the date of payment (YYYY/MM/DD).

If the amount in Box D is less than \$500 provide details of how it was disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT

4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
JOY ALEXANDER

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)

[Faint circular stamp or watermark]

**4236 - PREVIOUS FINANCIAL AGENTS
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE JOY ALEXANDER			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/04/13			
FINANCIAL AGENT'S LAST NAME ALEXANDER		FIRST NAME DEAN	MIDDLE NAME NORMAN
FINANCIAL AGENT MAILING ADDRESS 1700 - 1055 W. GEORGIA ST.			PHONE NO. 604-659-1866
CITY/TOWN VANCOUVER		POSTAL CODE V6E 3P3	EMAIL (IF AVAILABLE) dalexander@cypresscap.com
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)